

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 16
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) 1911 UNITED			FEC IDENTIFICATION NUMBER ▼ C C00508200		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee 7640 Sand Lake Road			Date M M / D D / Y Y Y Y Y Y Y Y 07 / 01 / 2012		
Mailing Address 7640 Sand Lake Road			Amount 31.93		
City Orlando	State FL	Zip Code 32836	Transaction ID : SE.4476		
Purpose of Expenditure Travel Expenses		Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____		
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 45784.57			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
Full Name (Last, First, Middle Initial) of Payee Chattahoochee KOA			Date M M / D D / Y Y Y Y Y Y Y Y 07 / 03 / 2012		
Mailing Address 2309 Flat Creek Road			Amount 10.00		
City Chattahoochee	State FL	Zip Code 32324	Transaction ID : SE.4500		
Purpose of Expenditure Travel Expenses		Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____		
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 47038.25			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			41.93		
(b) SUBTOTAL of Unitemized Independent Expenditures			 		
(c) TOTAL Independent Expenditures.....			 		
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Sinclair Skinner</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M / D D / Y Y Y Y Y Y Y Y 07 / 07 / 2012</p>					

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full)

1911 UNITED

FEC IDENTIFICATION NUMBER ▼

C C00508200

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

CJ's Crab Shack

Date

MM / DD / YYYY

Mailing Address 600 Ocean Drive

Amount

125.41

City State Zip Code
Miami Beach FL 33139

Transaction ID : SE.4529

Purpose of Expenditure
Travel ExpensesCategory/
Type

Office Sought: ☐ House ☐ Senate ☒ President
State: _____ District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

43809.92

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Cracker Barrel

Date

MM / DD / YYYY

Mailing Address 30227 Eastern Short Court

Amount

58.21

City State Zip Code
Spanish Fort AL 36527

Transaction ID : SE.4494

Purpose of Expenditure
Travel ExpensesCategory/
Type

Office Sought: ☐ House ☐ Senate ☒ President
State: _____ District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

51763.93

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

183.62

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

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Sinclair Skinner

[Electronically Filed]

Date

MM / DD / YYYY

Signature

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NAME OF COMMITTEE (In Full)
1911 UNITED

FEC IDENTIFICATION NUMBER ▼

C C00508200

Check If ☐ 24-hour report ☒ 48-hour report

☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Diana Cafe

Date

MM / DD / YYYY
07 / 01 / 2012

Mailing Address 99 NW 1st Street

Amount

65.50

City State Zip Code
Miami FL 33128

Transaction ID : SE.4538

Purpose of Expenditure
Travel Expenses

Category/
Type

Office Sought: ☐ House State: _____
☐ Senate District: _____
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 46258.81

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

First Watch

Date

MM / DD / YYYY
07 / 02 / 2012

Mailing Address 7500 West Sand Lake Road

Amount

126.50

City State Zip Code
Orlando FL 32819

Transaction ID : SE.4515

Purpose of Expenditure
Travel Expenses

Category/
Type

Office Sought: ☐ House State: _____
☐ Senate District: _____
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 46798.64

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

192.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

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Sinclair Skinner

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Date

MM / DD / YYYY
07 / 07 / 2012

Signature

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(SCHEDULE E)

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NAME OF COMMITTEE (In Full)

1911 UNITED

FEC IDENTIFICATION NUMBER ▼

C C00508200

Check If ☐ 24-hour report ☒ 48-hour report☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

Five Sisters

Date

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2012

Mailing Address 421 West Belmont Street

Amount

101.53

City State Zip Code
Pensacola FL 32501

Transaction ID : SE.4508

Purpose of Expenditure
Travel ExpensesCategory/
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

47139.78

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Harrison Hotel

Date

M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2012

Mailing Address 411 Washington Avenue

Amount

357.08

City State Zip Code
Miami Beach FL 33139

Transaction ID : SE.4547

Purpose of Expenditure
Travel ExpensesCategory/
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

44167.00

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

458.61

(b) SUBTOTAL of Unitemized Independent Expenditures.....▶

(c) TOTAL Independent Expenditures.....▶

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Sinclair Skinner

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Date

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2012

Signature

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NAME OF COMMITTEE (In Full) 1911 UNITED		FEC IDENTIFICATION NUMBER ▼ C C00508200	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Hilton			Date MM / DD / YYYY 07 / 05 / 2012	
Mailing Address 333 St. Charles Avenue			Amount 125.00	
City New Orleans	State LA	Zip Code 70130	Transaction ID : SE.4526	
Purpose of Expenditure Travel Expenses		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 52817.04			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hotel St. Augustine			Date MM / DD / YYYY 06 / 26 / 2012	
Mailing Address 347 Washington Avenue			Amount 111.87	
City Miami Beach	State FL	Zip Code 33139	Transaction ID : SE.4544	
Purpose of Expenditure Travel Expenses		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 39159.51			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	236.87
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Signature

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NAME OF COMMITTEE (In Full) 1911 UNITED		FEC IDENTIFICATION NUMBER ▼ C C00508200	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Hotel Tonight			Date MM / DD / YYYY 07 / 01 / 2012	
Mailing Address 144 Second Street 3rd Floor			Amount 148.00	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SE.4467	
Purpose of Expenditure Travel Expenses		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 45739.96			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hotel Tonight			Date MM / DD / YYYY 07 / 02 / 2012	
Mailing Address 144 Second Street 3rd Floor			Amount 142.00	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SE.4489	
Purpose of Expenditure Travel Expenses		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 46621.57			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	290.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Sinclair Skinner

Signature

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Date

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07 / 07 / 2012

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NAME OF COMMITTEE (In Full) 1911 UNITED			FEC IDENTIFICATION NUMBER ▼ C C00508200		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee Jackson Soul Food			Date M M / D D / Y Y Y Y Y Y Y Y 07 / 01 / 2012		
Mailing Address 950 NW 3rd Avenue			Amount 64.04		
City Miami State FL Zip Code 33136		Transaction ID : SE.4535			
Purpose of Expenditure Travel Expenses		Category/ Type 		Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA				Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 46193.31			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee Kayak Travel			Date M M / D D / Y Y Y Y Y Y Y Y 07 / 03 / 2012		
Mailing Address 55 N. Water Street Suite 1			Amount 210.44		
City Norwalk State CT Zip Code 06854		Transaction ID : SE.4517			
Purpose of Expenditure Travel Expenses		Category/ Type 		Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA				Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 47350.22			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			274.48		
(b) SUBTOTAL of Unitemized Independent Expenditures▶			 		
(c) TOTAL Independent Expenditures.....▶			 		
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Sinclair Skinner</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M / D D / Y Y Y Y Y Y Y Y 07 / 07 / 2012</p>					

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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NAME OF COMMITTEE (In Full) 1911 UNITED			FEC IDENTIFICATION NUMBER ▼ C C00508200		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					

Full Name (Last, First, Middle Initial) of Payee Marriott			Date M M / D D / Y Y Y Y Y Y 07 / 05 / 2012		
Mailing Address 859 Convention Center Blvd.			Amount 884.01		
City New Orleans	State LA	Zip Code 70130	Transaction ID : SE.4520		
Purpose of Expenditure Travel Expenses		Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____		
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 52647.94			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		

Full Name (Last, First, Middle Initial) of Payee Ocean 7 Cafe			Date M M / D D / Y Y Y Y Y Y 06 / 28 / 2012		
Mailing Address 660 Ocean Drive			Amount 188.33		
City Miami Beach	State FL	Zip Code 33139	Transaction ID : SE.4532		
Purpose of Expenditure Travel Expenses		Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____		
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 45174.33			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		

(a) SUBTOTAL of Itemized Independent Expenditures.....	1072.34
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Sinclair Skinner

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Signature _____ Date M M / D D / Y Y Y Y Y Y
07 / 07 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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NAME OF COMMITTEE (In Full) 1911 UNITED			FEC IDENTIFICATION NUMBER ▼ C C00508200		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee Office Depot			Date M M M / D D D / Y Y Y Y Y Y Y Y 07 / 05 / 2012		
Mailing Address 1429 St. Charles Avenue			Amount 44.10		
City State Zip Code New Orleans LA 70130		Transaction ID : SE.4523			
Purpose of Expenditure Office Supplies & Expenses		Category/Type 		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			
Calendar Year-To-Date Per Election for Office Sought 52692.04		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____			
Full Name (Last, First, Middle Initial) of Payee Perrys BBQ			Date M M M / D D D / Y Y Y Y Y Y Y Y 07 / 02 / 2012		
Mailing Address 511 Brandon Town Center Mall			Amount 10.57		
City State Zip Code Brandon FL 33511		Transaction ID : SE.4503			
Purpose of Expenditure Travel Expenses		Category/Type 		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			
Calendar Year-To-Date Per Election for Office Sought 46632.14		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____			
(a) SUBTOTAL of Itemized Independent Expenditures.....			54.67		
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures.....					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Sinclair Skinner</i>		[Electronically Filed]		Date M M M / D D D / Y Y Y Y Y Y Y Y 07 / 07 / 2012	

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) 1911 UNITED			FEC IDENTIFICATION NUMBER ▼ C C00508200		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee Sharkys			Date M M / D D / Y Y Y Y Y Y Y Y 07 / 04 / 2012		
Mailing Address 7100 North Davis Highway			Amount 105.50		
City Pensacola	State FL	Zip Code 32504	Transaction ID : SE.4512		
Purpose of Expenditure Travel Expenses		Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____		
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 47455.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
Full Name (Last, First, Middle Initial) of Payee Shell Oil			Date M M / D D / Y Y Y Y Y Y Y Y 07 / 01 / 2012		
Mailing Address 8411 Leesburg Pike			Amount 284.65		
City Vienna	State VA	Zip Code 22182	Transaction ID : SE.4478		
Purpose of Expenditure Travel Expenses		Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____		
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 46069.22			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			390.15		
(b) SUBTOTAL of Unitemized Independent Expenditures			 		
(c) TOTAL Independent Expenditures.....			 		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Sinclair Skinner</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y Y Y 07 / 07 / 2012	

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NAME OF COMMITTEE (In Full) 1911 UNITED		FEC IDENTIFICATION NUMBER ▼ C C00508200	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Shell Oil			Date MM / DD / YYYY 07 / 01 / 2012	
Mailing Address 8411 Leesburg Pike			Amount 60.05	
City Vienna	State VA	Zip Code 22182	Transaction ID : SE.4485	
Purpose of Expenditure Travel Expenses		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 46129.27			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Shell Oil			Date MM / DD / YYYY 07 / 02 / 2012	
Mailing Address 8411 Leesburg Pike			Amount 189.79	
City Vienna	State VA	Zip Code 22182	Transaction ID : SE.4480	
Purpose of Expenditure Travel Expenses		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 46448.60			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	249.84
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sinclair Skinner

Signature

[Electronically Filed]

Date

MM / DD / YYYY
07 / 07 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 12 OF 16
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

1911 UNITED

FEC IDENTIFICATION NUMBER ▼

C

C00508200

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

Shell Oil

Date

M M M /

D D D /

Y Y Y Y Y Y Y

Mailing Address 8411 Leesburg Pike

Amount

City

Vienna

State

VA

Zip Code

22182

40.00

Transaction ID : SE.4505

Purpose of Expenditure
Travel ExpensesCategory/
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

46672.14

Disbursement For: ☐ Primary2012 ☐ Other (specify) ▶☒ General

Full Name (Last, First, Middle Initial) of Payee

Sinclair Skinner

Date

M M M /

D D D /

Y Y Y Y Y Y Y

Mailing Address 700 12th Street NW Suite 700

Amount

City

Washington

State

DC

Zip Code

20005

4000.00

Transaction ID : SE.4469

Purpose of Expenditure
Vehicle RentalCategory/
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

51455.72

Disbursement For: ☐ Primary2012 ☐ Other (specify) ▶☒ General

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

4040.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sinclair Skinner

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 13 OF 16
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) 1911 UNITED		FEC IDENTIFICATION NUMBER ▼ C C00508200	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Damien Smith			Date MM / DD / YYYY 07 / 05 / 2012	
Mailing Address 1714 N. McCadden #3106			Amount 250.00	
City Hollywood	State CA	Zip Code 90028	Transaction ID : SE.4491	
Purpose of Expenditure Canvassing Stipend		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 51705.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Stuckeys			Date MM / DD / YYYY 07 / 03 / 2012	
Mailing Address P.O. Box 532			Amount 175.92	
City Bagdad	State FL	Zip Code 32530	Transaction ID : SE.4497	
Purpose of Expenditure Travel Expenses		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 47028.25			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	425.92
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Sinclair Skinner

Signature

[Electronically Filed]

Date

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07 / 07 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) 1911 UNITED			FEC IDENTIFICATION NUMBER ▼ C C00508200		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee Sun Life Grocery			Date M M / D D / Y Y Y Y Y Y Y Y 07 / 01 / 2012		
Mailing Address 211 N. Parramore Avenue			Amount 12.68		
City Orlando	State FL	Zip Code 32801	Transaction ID : SE.4473		
Purpose of Expenditure Travel Expenses		Category/ Type 	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 45752.64			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
Full Name (Last, First, Middle Initial) of Payee The Place			Date M M / D D / Y Y Y Y Y Y Y Y 06 / 30 / 2012		
Mailing Address 720 Ocean Drive			Amount 317.85		
City Miami Beach	State FL	Zip Code 33139	Transaction ID : SE.4550		
Purpose of Expenditure Travel Expenses		Category/ Type 	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 45591.96			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			330.53		
(b) SUBTOTAL of Unitemized Independent Expenditures			 		
(c) TOTAL Independent Expenditures.....			 		
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;"> <i>Sinclair Skinner</i> Signature [Electronically Filed] Date M M / D D / Y Y Y Y Y Y Y Y 07 / 07 / 2012 </p>					

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) 1911 UNITED		FEC IDENTIFICATION NUMBER ▼ C C00508200	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Tony Romas			Date MM / DD / YYYY 06 / 29 / 2012	
Mailing Address 18050 Collins Avenue			Amount 99.78	
City Sunny Isles Beach	State FL	Zip Code 33160	Transaction ID : SE.4541	
Purpose of Expenditure Travel Expenses		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Twin Cactus			Date MM / DD / YYYY 07 / 02 / 2012	
Mailing Address 507 Brandon Town Center Mail			Amount 30.97	
City Brandon	State FL	Zip Code 33511	Transaction ID : SE.4483	
Purpose of Expenditure Travel Expenses		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	130.75
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Sinclair Skinner

Signature

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Date

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(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) 1911 UNITED	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00508200 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Wyndham Orlando		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 07 / 02 / 2012 </div>
Mailing Address 8001 International Drive		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 53.69 </div>
City Orlando	State FL	
Purpose of Expenditure Travel Expenses		Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		Amount
City	State	
Purpose of Expenditure		Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure:		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 53.69 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 8425.40 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 8425.40 </div>

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Sinclair Skinner
 Signature

[Electronically Filed]

Date

07 / 07 / 2012